LGS STONEYGATE

Policy and procedures on the provision of first aid

This policy should be read with regard to the Administration of Medicines Policy. It refers to LGS Stoneygate (LGSS) including Early Years Foundation Stage (EYFS).

1. Introduction

The H&S at Work Act (HSWA) 1974 places duties on employers for the health and safety of their employees and anyone else on the premises. This covers the Head Teacher, teachers, non-teaching staff, children and visitors. The Education (Independent Schools Standards) (England) Regulations 2014 require that independent schools have and implement a satisfactory policy on First Aid and have appropriate facilities for pupils in accordance with the Advice on Standards for School Premises, issued by the Department of Education (March 2015).

LGS Stoneygate is under a general duty to provide a safe place of work, with suitable arrangements, including welfare. This policy describes what facilities are in place, however, other policies such as the Health and Safety policy and the Administration of Medicines policy outline procedures in respect of administering medicines, and the responsibilities of relevant staff

2. First Aid Provision and Training

Leicester Grammar School Trust employs a School Nursing Team consisting of two registered nurses and three healthcare assistants. They provide healthcare cover for the whole Trust and are contracted to work during the term-time.

At LGSS, a healthcare assistant is directly employed to provide support and assistance during the busiest times of each school day. If a member of the School Nursing Team is not on site, they can always be contactable at Leicester Grammar school for advice and guidance.

LGS Stoneygate is committed to providing sufficient numbers of first aid personnel to deal with accidents and injuries, thus ensuring a member of staff is always available to provide first aid treatment when the pupils are on the school site. To this end, the level and need of first aid training is continually assessed and the necessary

arrangements made to organise training and competency testing for staff to ensure that they can meet the statutory requirements and the needs of the school.

To reflect the age of the pupils and type of activity they will be participating in, the qualifications currently held by staff consist of Emergency First Aid for Schools, Paediatric First Aid, First Aid at Work and Forest School First Aid.

At least one person with a current Paediatric First Aid certificate must be on the premises at all times when EYFS children are present. From 1st September 2016 all NQT EYFS practitioners must hold a current PFA to be included in the staff:child ratios. The first aid training must also be approved by the local authority and consistent with the requirements set out in 'Statutory Framework for the Early Years Foundation Stage'. This training will also be relevant to a school setting and will cover paediatric issues.

A current list of LGSS staff who hold a current first aid qualification can be requested from the Lead School Nurse

3. Legal Indemnity of First Aiders

It is unlikely as first aid personnel rendering assistance will become subject to legal action because of a deterioration in the injured person's condition. However, Leicester Grammar School Trust has arranged to guard against this possibility by providing, through its insurance policies, indemnification for any member of staff who assists a person who becomes ill/injured either on or off the school premises but in association with school business.

4. First Aid Room

The main first aid room for LGSS is located in the stable block. It is stocked with first aid supplies, over the counter medicines, a fridge, a sink and a trolley. Pupil's second adrenaline auto-injectors are located in individually labelled bags hanging on the wall in this room. Other emergency medicines such as the school emergency inhalers are also kept in this room.

5. First Aid Kits

First aid boxes are positioned at suitable locations around the school to assist in the rapid retrieval of supplies and there is one in every EYFS classroom so they are easily accessible at all times. Each box contains first aid requisites and a general guidance leaflet as recommended by the Health and Safety Executive.

School staff are provided with small "bum bag style" first aid kits for use when in the playground and school grounds.

First aid bags, appropriately stocked to deal with sporting injuries, are allocated to PE staff for use when teaching within the school grounds and attending external fixtures. These bags are stored in the first aid room.

Trip first aid kits are available for staff who undertake their work/activity off the school site and where an assessment has highlighted access to first aid facilities may be

restricted. These circumstances may include school trips, persons travelling in vehicles, social events arranged or supported by the school. Trip first aid kits can be found in the first aid room and are allocated according to the specifics of the trip.

A Bodily Fluid Spillage Kit is stored in the LGSS first aid room.

The School Nursing Team is responsible for the up-keep and re-stocking of the first aid rooms, first aid boxes and kits.

6. Defibrillators

There is one Automated External Defibrillator (AED's) located in the foyer of the new building on the school site. The defibrillator is stocked with a combined adult and paediatric pad and is registered with the East Midlands Ambulance Service.

7. First Aid Procedures

A member of the school nursing team or the rostered first aider is responsible for providing first aid, basic assessment of an unwell child, deciding on the child going home, contacting the parent and completing the relevant accompanying documentation. For responsibilities of a First Aider refer to Appendix 1.

Walkie -talkie radios have been placed throughout the school enabling quick access for staff to the duty first aider.

For EYFS pupils, any accident and the first aid treatment administered will be reported to parents the same day or as soon as is practically possible. At LGSS, parents are informed if a head injury is sustained (Please refer to the Trust Head Injury Policy for further details), or the first aider feels an injury requires further explanation or advice. In the case of a head bump, a head bump notification wrist bracelet should be worn by the child and readily displayed to staff and parents.
Any first aider who sees a child must record the details in a first aid logbook however trivial.

If it is evident that hospital attention is necessary, the School Nurse or first aider will decide the most appropriate way of transporting the patient. If an ambulance is required, the emergency 999 service should be used. In cases of a less severe nature, it may be appropriate to transport them to hospital by one of the three following options.

- Contacting the parents and request that they undertake the duty themselves.
- Using the school minibus with the School Nurse or any other member of staff accompanying.
- Using a taxi with the School Nurse or other member of staff accompanying.

No child will travel to hospital unaccompanied. Whilst at the hospital, staff remain "in loco parentis" until parents relieve them of their duty of care for the child.

A pupil should never make their own arrangements to leave the school site if they are injured or unwell. The decision should be made by the school nursing team or qualified first aider in consultation with the parent or carer.

8. Pupils and Staff with On-going Medical Conditions

On entrance to the school, it is a requirement for a medical questionnaire to be completed. A data collection sheet is annually sent home which includes a student health questionnaire. Parents are required to check, amend, if necessary, sign and return the form to school.

Once these forms are returned, each child's medical record is updated on the school database system as necessary. This ensures the School Nurse is kept up to date with the child's medical history, including the nature and effect of any disability. Any information required to keep the child safe whilst in school is then communicated to the relevant staff.

It is the parents' responsibility to ensure the School Nurse is kept fully up to date with their child's medical diagnoses and on-going medical requirements. Parents are advised to contact the School Nursing Team to inform them of any changes to the pupil's medical history over the course of the year. This information is uploaded onto the individual child's medical record and disseminated to the relevant members of staff.

Individual care plans are drawn up for pupils with acute and chronic medical conditions. These outline the diagnosis, treatment to be provided and actions to take in case of an emergency and can be found in the electronic pupil notes held by the Trust.

In the case of potentially life-threatening conditions, such as anaphylaxis or asthma, this information is displayed with a photograph on the "Student Health" wall in the staff room in Manor House, the staff room in Senior Building and in the kitchen area of School House. This ensures all staff members are fully up to date, can identify pupils with ongoing health needs and will be aware of the treatment possibly required in an emergency.

Staff are encouraged to provide similar information to the nurse regarding their own past medical history. This is treated with the strictest confidence and would only be disclosed to medical staff in the event of an emergency.

If staff are taking medication which may affect their ability to care for children, they should take medical advice and inform the Head Teacher. A decision will then be made regarding their fitness to work. Staff medication must be securely stored out of reach of children.

8. Infection Protection and Control.

Precautions should be taken to protect the school nursing team or qualified first aider from coming into contact with infectious substances and to prevent their transmission to the wider school community. Gloves must be worn when dealing with bodily fluids, and good hand hygiene should be adhered to at all times. This can be either through the use of a disinfectant hand gel, or by a good hand washing technique, using soap, washing under running water for more than 20 seconds and drying effectively.

The Government state that the majority of staff in education settings do not require PPE beyond what they would normally need for their work. PPE is only needed in a very small number of cases, for example, children, young people and students whose care routinely already involves the use of PPE due to their intimate care needs should continue to receive their care in the same way. LGST has invested in the appropriate PPE to ensure it is available for staff if required.

In the case of a bodily fluid spillage a site services team member must be contacted and the bodily spillage kit retrieved and utilised. If a member of staff has concerns regarding coming into contact with bodily fluids whilst carrying out first aid, they should contact the School Nurse.

10. Illness and infectious diseases

Children with infectious diseases should not in general attend school. Although mild snuffles and colds need not necessarily prevent a child attending, diarrhoeal illness etc should be a reason for a child to stay at home.

If a child becomes ill whilst at school and is considered too unwell to continue with the day, parents will be contacted and arrangements made for the child to be collected and taken home. The school will notify other parents if a significant health risk exists or may exist to other children and/or staff.

A child with an infectious disease should be excluded from school until fully recovered or until the required period set by the Dept. of Health has passed. For example, pupils must not return to school for at least 48hrs after the symptoms of diarrhoea or vomiting have ceased.

A list of notifiable diseases is displayed in the School Nurses office. If a child suffers from a notifiable disease, the child must not attend school until their GP has determined them fit to do so. The School Nurse must be informed of the diagnosis without delay. It is the GP's responsibility to notify the Director of Public Health via the Duty Room.

Further clarification and guidance on infection control in schools and childcare settings can be found at:

https://www.publichealth.hscni.net/publications/guidance-infection-control-schools-and-other-childcare-settings-0

11. Accident Reporting

As soon as possible after an accident occurring to a pupil, employee or visitor, the incident must be fully and accurately reported on an accident form. An accident form can be obtained from the First Aid room. The form should be completed fully and promptly sent to the Nurse for evaluation. Where possible, detailed statements should be obtained from witnesses.

If necessary, the Head teacher and the Chief Executive will be informed of any relevant information and an investigation taken place. A report will also be made by the School Nurse to the Health and Safety committee. This is to ensure any accidents are followed

up and measures have been put in place to prevent the accident reoccurring in the future.

12. Near Misses and Dangerous Occurrences

A near miss is any incident which could have resulted in an accident.

A dangerous occurrence is a near miss which could have led to serious injury or loss of life.

The Head teacher and the Chief Executive should be informed for both of these types of incidents, suitable action can then be taken to avoid similar accidents in the future.

13. Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)

It is a legal duty to report and record some accidents and illnesses to the Health and Safety Executive (HSE). Once the patient has received medical attention, the Chief Executive and/or School Nurse will decide if the incident is reportable under the above regulations and make the necessary arrangements.

Reporting can be done online or by telephone. HSE telephone number: 0845 3009923. Advice on RIDDOR can be found at:

http://www.hse.gov.uk/riddor/

Any person whilst on duty who suffers an injury as a result of an accident that occurred off the school site should also report in accordance with the aforementioned procedure. In addition, accidents occurring on a third party's site should be reported with the arrangements applying at that site.

14. Safe Systems of Work

The following arrangements should be followed in order to ensure that suitable and sufficient provision of first aid staff and equipment is available with the school.

- The name(s) and location(s) of first aiders and equipment must be displayed adequately throughout the school.
- Staff should be familiar with the arrangements for administering first aid. Pupils must know whom to contact in case of accident or illness (i.e., School Nurse or nominated First Aider on duty).
- The School Nursing Team will maintain the first aid boxes, travel first aid kits and sports first aid kits, ensuring that they are fully stocked and the contents have not expired.
- Staff should maintain easy access to a first aid box.
- Ensure all staff are familiar with requirements of this policy through instruction and training.

13. Review of First Aid Procedures

The First Aid Policy and Procedures will be reviewed and updated annually.

Appendix 1- Responsibilities of first aiders

All First Aiders at LGSS have the following responsibilities to:-

First Aid Practice

- Be readily available.
- Follow the principles and practices as laid down in the first aid training.
- Comply with the aims of first aid:-
    - To preserve life
    - To prevent the condition worsening
    - To promote recovery
- Not to ignore accidents or illness under any circumstances, or to refuse to give treatment and assistance if required to do so.
- Not to undress any patient unnecessarily.
- Safeguard the patient's clothing and possessions.
- Respect the patient's confidentiality at all times, and to discuss the patient's condition with only those necessary.
- Maintain the highest practicable level of cleanliness whenever treating a patient.
- Maintain a record of all patients treated, no matter how trivial.
- Attend refresher courses as necessary.

In an emergency:

- Quickly and accurately assess the situation.
- Identify the condition from which the casualty is suffering; but not to treat any illness or injury which is beyond your capability.
- Give immediate, appropriate and adequate treatment, bearing in mind that a casualty may have more than one injury and that some casualties will require more urgent attention than others.
- Arrange, without delay, for the transfer of a casualty (should it be required) to their GP, hospital or home, according to the seriousness of the condition.
- Stay with the casualty until they are handed over to the care of a doctor, paramedic, the hospital A & E unit or other appropriate person.

Appendix 2- Emergency procedures (Illness and accident)

If anyone should become ill or suffer an injury as a result of an accident, the procedures below should be followed:

1. **Assess the situation.** Ensure the situation is safe to safe to approach. Take a few seconds to look around and observe for any danger or potential hazards.

2. **Make the area safe.** If safe to do so, remove or reduce any dangers or potential hazards before attending to the patient. If it is not possible to sufficiently reduce the danger to a level that allows the rescuer to safely enter the situation, then the emergency services must be contacted ASAP; the patient should be given all possible reassurances.

3. **Administer first aid.** First aid should be rendered, but only as far as knowledge and skills admit and it is safe to do so.

Precautions should be taken to protect the staff member from coming into contact with bodily fluids. Good hand hygiene should be adhered to at all times either through the use of disinfectant hand gel or by a good hand washing technique.

In the case of a bodily fluid spillage a site services team member must be contacted and the bodily spillage kit retrieved and utilised. If a member of staff has concerns regarding coming into contact with bodily fluids whilst carrying out first aid, they should contact the School Nurse.

4. **Get help.** If required, further first aid support should be summoned via the walkie-talkie.

5. **Transport to hospital.** If it is evident that hospital attention is necessary, the duty first aider or School Nurse will decide the most appropriate way of transporting the patient. If an ambulance is required, the emergency 999 service should be used. In cases of a less severe nature it may be appropriate to transport them to hospital by one of the three following options.

    - Contacting the parents and request that they undertake the duty themselves.
    - Using the school minibus with the School Nurse or any other member of staff accompanying.
    - Using a taxi with the School Nurse or other member of staff accompanying.

No casualty who is a child should be allowed to travel to hospital unaccompanied.

Whilst at the hospital, staff remain "*in loco parentis*" until parents relieve them of their duty of care for the child.

6. **Notification of parents.** In cases of an emergency, the Duty First Aider or School Nurse will contact reception who will notify the child's parents with minimum delay.

7. **Accident forms.** As soon as possible, every case of injury or accident to a pupil, employee or visitor must be fully and accurately reported on the appropriate accident form which should be sent to the School Nurse for analysis. The incident should also be entered into the First Aid Log Book in the First Aid Room and in the case of a pupil, onto SIMS. Where possible, detailed statements should be obtained from witnesses.

The Head teacher and the Chief Executive will be informed of any relevant information and a report given at the Trust Staff Health and Safety meeting every quarter and at the Trust Board Health and Safety meeting.